

Dental care for patients with head and neck cancer

This leaflet explains why it is important to see a dentist before and after your treatment for head and neck cancer. It also explains what you can expect when you come to the hospital dental department before, during and after your cancer treatment.

If you have any further questions, please speak to a dentist, doctor or nurse caring for you.

Before cancer treatment

Why do I need to see a dentist before my cancer treatment?

Radiotherapy and chemotherapy can cause side effects in the mouth such as a dry, sore mouth. To avoid complications during and after your cancer treatment, it is important that your teeth and gums are as healthy as possible. Our dental team will help you achieve this. We will also explain how your cancer treatment might affect your future dental care. We may prescribe you a sodium fluoride toothpaste (Duraphat[®] 5000) to help protect your teeth.

What will happen if my teeth and gums are not healthy?

If your teeth and gums are not healthy, you may have problems with pain and infection during or after your cancer treatment. In some cases these problems can be severe.

What will happen when I come for my dental assessment visit?

A specialist dentist will discuss the current health of your teeth and gums with you. Any teeth that are likely to cause you pain or infection in future may be recommended for extraction.

How does the dentist decide which teeth to recommend for extraction?

It is not always easy to decide which teeth should be extracted. Often more than one dentist will be involved in making the decision and many factors are considered. These include the location of your cancer and what type of treatment you will have. If your teeth are decayed, filled or loose, this will also affect the decision. Unfortunately, there are times when even healthy teeth (particularly back teeth) may be recommended for extraction. This is because the side effects of radiotherapy may complicate your future oral care. The dentist will always discuss with you why extraction is recommended.

If extractions are recommended, when will they be done?

Dental extractions normally need to be done before the rest of your cancer treatment can start. To avoid delay, dental extractions will usually be offered at the same visit as your dental assessment.

Giving my consent (permission)

We want to involve you in decisions about your care and treatment. If you decide to go ahead, you will be asked to sign a consent form. This states that you agree to have the treatment and you understand what it involves.

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If you would like more information about our consent process, please speak to a member of staff caring for you.

What happens during dental extraction?

Most dental extractions are carried out under a local anaesthetic. This means the dentist gives injections into the gums to numb the mouth and prevent pain during the procedure.

Will I feel any pain?

Having the local anaesthetic injections can be uncomfortable, but after this the procedure should not be painful.

What if I am anxious about going to the dentist?

It is not uncommon to feel anxious about dental extractions. If you are worried that your anxiety is too great, let the dentist know. In some cases we can arrange sedation or a general anaesthetic for your treatment. However, having a local anaesthetic is generally the best way to avoid any delay to the rest of your cancer treatment.

What happens after my extractions?

After your extractions you will be able to go home. Your dentist will give you instructions on how to look after your mouth while the gums heal.

Will I have a follow-up appointment?

If teeth have been extracted, you will usually be asked to attend a follow-up appointment around four or five months after starting your cancer treatment, to check on the healing process. It is important to attend this appointment, even if you feel confident that you have fully healed.

During cancer treatment

What changes to my mouth should I expect during cancer treatment?

About two weeks after the start of treatment you may notice that your mouth becomes sore and you may develop mouth ulcers. Your mouth may become dry and there will be a loss of taste. These changes can make it difficult to swallow and eat. If you normally wear dentures your mouth may become too sore to continue wearing them during your treatment. The muscles of your jaw can feel stiff as a result of radiotherapy. Brushing your teeth may also become difficult because your mouth is sore.

How can I look after my mouth during my cancer treatment?

There are steps you can take to manage the unwanted oral effects of your cancer treatment. These are explained more fully in the table below.

Unwanted effect of treatment	What happens?	What can I do?
Taste loss	The taste buds are damaged by radiotherapy and chemotherapy.	<ul style="list-style-type: none">• Cleaning your teeth, brushing your tongue and rinsing with 10ml of salt water prior to mealtimes may improve taste.• Salt water mouthwash can be prepared by adding a teaspoon of salt to a glass of tepid water.• Taste will usually return over time. As it does you may notice an unpleasant taste for a time but this will improve.
Jaw stiffness	The muscles that move the jaw can become stiff after radiotherapy.	<ul style="list-style-type: none">• Gentle jaw exercises will be recommended.
Dry mouth	Usually, saliva moistens the mouth and protects against tooth decay and tooth sensitivity. Radiotherapy damages the glands which produce saliva. The dryness is worse during treatment but slowly improves. Saliva may not return completely after treatment.	<ul style="list-style-type: none">• Sip water frequently. Avoid fizzy or flavoured waters, as these may damage your remaining teeth.• Chew sugar-free gum after meals or snacks.• Ask your doctor or dentist for advice. They may recommend a saliva substitute such as AS Saliva Orthana[®] spray, Glandosane[®] spray or Biotene[®] Oralbalance gel.

Sore mouth	<ul style="list-style-type: none"> • Radiotherapy and chemotherapy may damage normal cells in the lining of your mouth. • The inside of the mouth, tongue and throat may become red, sore and ulcerated. • You may find it uncomfortable to eat, speak, swallow and brush your teeth. • Soreness may also be due to a fungal infection called thrush. 	<ul style="list-style-type: none"> • Clean your teeth with fluoride toothpaste such as Duraphat® 5000 four times daily. • Use a baby soft toothbrush if a regular toothbrush is too sore. • Rinse your mouth with 10ml salt water mouthwash four to six times daily. • Mouthwash containing chlorhexidine (eg Corsodyl®) and any mouthwashes containing alcohol should be avoided. • Ask your doctor or dentist for advice. They may recommend a mouthwash, oral spray or gel to relieve pain. • You may need a course of antifungal medication if you have a thrush infection.
Difficulty with dentures	Lack of saliva and mouth soreness makes dentures difficult to wear.	<ul style="list-style-type: none"> • See your dentist if your dentures are painful. • Clean your dentures carefully after each meal, at least twice daily. • Clean the dentures with soap and water. Do this over a sink of water to break the fall if they drop. • Take your dentures out at night. • Soak your dentures in an appropriate cleanser, eg Steradent®, overnight.

After cancer treatment

How long will the unwanted effects of cancer treatment in my mouth last?

Some of the unwanted effects of cancer treatment such as the soreness, dry mouth and loss of taste may gradually improve in the weeks and months after treatment is completed. Unfortunately some patients will have a permanently dry mouth.

Why do I need to see a dentist after my cancer treatment?

Cancer treatments cause permanent changes in the mouth, teeth and jaws. Because of this you will always be at a higher risk of developing dental problems than before. This is why it is extremely important to go for regular check-ups with a dentist. You should go to get checked even if you are not aware of any problems.

What are the main problems that I need to try and avoid after my cancer treatment?

Two main problems to avoid are **tooth decay** and **osteoradionecrosis (ORN)**:

Tooth decay – Saliva is very important in protecting your teeth against decay. A dry mouth means you are at much higher risk of tooth decay. Even if you only have a few teeth, it's important to have a good mouth care routine to help keep those teeth in good condition.

Osteoradionecrosis – This is a rare and serious late effect of radiotherapy. The radiotherapy may cause changes to the jawbone. Sometimes, this may lead to tissue in the jawbone dying. This condition is called osteoradionecrosis or ORN.

Most people who have radiotherapy will never develop ORN. However, certain factors can increase the risk of ORN. These include smoking, wearing poorly fitting dentures, having an infection and certain dental treatments. Higher-risk dental treatments include extractions or surgery for dental implants. A good mouth care routine will reduce your risk of ORN.

If tissue in the jawbone dies, it may cause pain, numbness or a feeling of heaviness in the jaw. You may feel an area of roughness on your gum. Sometimes there is swelling around the gum, and teeth can become loose.

Treatment of ORN may involve medications, painkillers and occasionally surgery to remove the affected tissue. ORN can be difficult to treat effectively, so the dental team will work with you to try and prevent it.

Will any teeth extracted before my cancer treatment be replaced afterwards?

Unfortunately, teeth extracted in preparation for cancer treatment cannot routinely be replaced by the hospital after treatment is completed. This is partly because some methods of replacing teeth may increase your risk of developing ORN. It is best to ask for advice about your individual situation when you see your dentist.

Will I be able to go back to my own dentist after my cancer treatment?

After cancer treatment most patients can expect to be discharged from the hospital back to the care of their own dentist. It is essential that you are registered with a dentist. If you are not registered with a dentist, you will need to do so.

Where can I obtain information or support about other symptoms?

If you are having problems such as weight loss or swallowing difficulties, your dentist can refer to the dietitian or speech therapist.

Where can I find out more?

Cancer Research UK

Provides information and support to people with cancer and their relatives.

t: 0808 800 4040 **w:** www.cancerhelp.org.uk

Macmillan Cancer Support

Information about all aspects of living with cancer.

t: 080 8808 0000 (Mon-Fri, 9am-8pm) **w:** www.macmillan.org.uk

Further information

The **dental oncology service** is part of the Department of Sedation and Special Care Dentistry. It is located on Floor 26 of Guy's Tower Wing, Guy's Hospital.

Referrals to dental oncology

Initial appointments can be arranged by your oncologist, surgeon or any member of your cancer care team by sending a referral.

fax: 020 7188 1885

Appointments with the dental oncology service

We understand that during your cancer treatment you may have lots of appointments with different services. If you need to change an existing appointment with the dental oncology service please telephone us for advice.

t: 020 7188 6066

Missed appointments with the dental oncology service

The dental oncology service is part of the Department of Sedation and Special Care Dentistry. This is a very busy department with many patients urgently needing dental appointments. It is important to note that if you fail to attend your dental appointment without sufficient notice, you may be discharged without further appointments being offered.

Dimbleby Cancer Care

Dimbleby Cancer Care is the cancer support service for Guy's and St Thomas' NHS Foundation Trust. They have drop-in information centres, and also offer complementary therapies, psychological support and benefits advice.

Drop-in information centres are located at Guy's in Oncology Outpatients (Ground floor, Tabard Annexe) and at St Thomas' on the Lower Ground Floor, Lambeth Wing.

t: 020 7188 5918 **e:** richarddimblebycentre@gstt.nhs.uk **w:** www.dimblebycancercare.org

Contact us

For queries about the dental oncology service or to change an appointment, please telephone 020 7188 6066

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit www.guysandstthomas.nhs.uk/leaflets

Pharmacy Medicines Helpline

If you have any questions or concerns about your medicines, please speak to the staff caring for you or call our helpline.

t: 020 7188 8748 9am to 5pm, Monday to Friday

Patient Advice and Liaison Service (PALS)

To make comments or raise concerns about the Trust's services, please contact PALS. Ask a member of staff to direct you to the PALS office or:

t: 020 7188 8801 at St Thomas' **t:** 020 7188 8803 at Guy's **e:** pals@gstt.nhs.uk

Language Support Services

If you need an interpreter or information about your care in a different language or format, please get in touch using the following contact details.

t: 020 7188 8815 **fax:** 020 7188 5953

NHS 111

Offers medical help and advice from fully trained advisers supported by experienced nurses and paramedics. Available over the phone 24 hours a day.

t: 111

NHS Choices

Provides online information and guidance on all aspects of health and healthcare, to help you make choices about your health.

w: www.nhs.uk

Become a member of your local hospitals, and help shape our future

Membership is free and it is completely up to you how much you get involved. To become a member of our Foundation Trust, you need to be 18 years of age or over, live in Lambeth, Southwark, Lewisham, Wandsworth or Westminster or have been a patient at either Guy's Hospital or St Thomas' Hospital in the last five years. To join:

t: 0848 143 4017 **e:** members@gstt.nhs.uk **w:** www.guysandstthomas.nhs.uk